Case 4:13-cv-00360-BSM Document 2 Filed 06/14/13 Page 1 of 10

# UNITED STATES DISTRICT COURT

EASTERN DISTRICT COURT

JUN 1 4 2013

	DOME	DISTRICT	OFARKANDOASIAMES V By:	V. McCORMACK CLERK
Floria A.Bo	anch a Ed	4 B- V	Ву:	DEP CLERK
Pl	laintiff(s)	LT XL		DEPCLER

VS.

Case Number: 4:13 cv 360 BSM

Kenneth A. Martin, M.D. Jason Wardell Defendani(s) AR Surgical Hospital (ASH), ELAL

This case assigned to District Judge Miller and to Magistrate Judge

**COMPLAINT** 

A. Parties

Gloria A. Bunch, is a citizen of Eagan, MN

who presently resides at P.O. Box 21096 Eagan, MN 55121

(mailing address if different from residence)

2) Defendant Kenneth A. Martin, MD is a citizen of Pulaski CO, Jason Wardell, (Name of first defendant) (City, State)

and is employed as Medical Ortho Doctor and Physician Assistant (Position and title, if any) (Tason Wardell)

3) Defendant AR Surgical Hospital is a citizen of North L. R. AR (Name of second defendant) and is employed as Surgical Hospital-Risk Management (Position and title, if any)

[You may attach additional pages (8½" x 11") to furnish the above information for additional defendants.]

#### B. Jurisdiction

1) Jurisdiction is asserted pursuant to:

Guilt of All of the Following pursuant to Ark. Code Ann. \$17-95-103 (Negligence, Standard of Care, Failure To TX, Abandonment Fulsi Fied Records, Failure To DX, Intentional Willful Misleading to have an unnessary Surgery For a Bakers Cyst, Malpraetice Direct Evidence...

Dr. Martin, & Jason Wardell, P. A. are guilty of operating beyond the Standard of Care, Enclargerment, Failure To properly diagnose, Failure To Inform of Risks), Carlessness, Failure To Refer, Falsified Medical Records, Negligence, Aiding of Abething, Intentional & Willful Misleading me to have an unnessary Surgery Pernament, Wreckless Surgery leading To a Revision Chronic Pain, RSD, Pernament Complications. NO LIFE

I	alleg	e the	fol	lowing:
•	41105	o dito	101	

	Supporting Facts: (Include all facts you consider important, including names of persons involved, places and dates. Describe exactly how each defendant is involved. State the facts clearly in your own words without citing legal authority or argument.)  SEE 1 Medical Documentation.
2.	
	Supporting Facts: (Include all facts you consider important, including names of persons involved, places and dates. Describe exactly how each defendant is involved. State the facts clearly in your own words without citing legal authority or argument.)
	SEE: Medical Documentation.
3.	
	Supporting Facts: (Include all facts you consider important, including names of persons involved, places and dates. Describe exactly how each defendant is involved. State the facts clearly in your own words without citing legal authority or argument.)
	ace, brief
sary, y	ou may attach additional pages (8½" x 11") to explain any allegation or to list additional supporting facts in the same format as above.]
uest	for Relief
lieve	that I am entitled to the following relief:
1 1	1 Million Dollars Punifive Damages, All Medical Bills/8 Bills Paid in Full; Compensatory Damages in the amount of \$50 n Dollars with Finterest and Paid Gloria A. Bunch

Taxes on All Monetary Relief. Licasses to be Reyoked Pernamently, Note: There is No Amount of Money that Could take Away the Pain or give me My LIFE back ...

Current Address P.O. Box 21096 city Eagan, state MN 55121 501) 613-8778

Shoriz To Bunch

Case 4:13-cv-00360-BSM Document 2 Filed 06/14/12 Page 3 of 10 Bunch 501) 613-8778

Dr. Kenneth Rosensweig, Gordon Newbern, CNPOF Jason Stewart, Dr. Jason Stewart, MAMS School of Orthopedics, Ark, Surgical Hospital (AsH) are All guilty OF Medical Malpractice, Medical Negligence, Abandonment, Neglect, Fraud, Aiding & Albetting, Failure To inform of Risk(s), Failure To Refer, Carlessness, Operating beyond The Standard of Care, Failure to DX, Intentional/WillFul Misleading to have an Unnessary TKR Surgery For q "Baker's Cyst", Wreckless, Endangerment Pernament Damages, Indangerment Damages (Inability To Islack, Put Any Weight on (1) Leg/ Unable To Lift/Extend Leg, Chronic Pain, RSD, Pernament Injuries, NO Quality of Life, Failure To TX and All other Medical Malpraetice complications). All Doctors/Hospital Aided & Abetted to help Conceal unlauful Medical Malpractice and/or give me the proper Medical Attention that I needed 30 desperately When I hart to the point that I begged God daily to just let me DIE and was Sureidal Daily due to the inhumane, Malicious Vindictive Injustice to help (4 AMS- Strive School Based Program) to also conceed a trostile and Inhumane Employment Discinminations Claims against UAMS and Veterans Administration Whom I previously Morked For and labrongfully of Terminated.

# Social Security Administration

Date: April 4, 2013

Claim Number: XXX-XX-2934A

XXX-XX-2934DI

You asked us for information from your record. The information that you requested is shown below. If you want anyone else to have this information, you may send them this letter.

## **Information About Current Social Security Benefits**

Beginning December 2012, the full monthly Social Security benefit before any deductions is \$ 1194.60.

We deduct \$104.90 for medical insurance premiums each month.

The regular monthly Social Security payment is \$ 1089.00. (We must round down to the whole dollar.)

Social Security benefits for a given month are paid the following month. (For example, Social Security benefits for March are paid in April.)

Your Social Security benefits are paid on or about the third of each month.

# **Information About Past Social Security Benefits**

From December 2011 to November 2012, the full monthly Social Security benefit before any deductions was \$ 1174.70.

We deducted \$99.90 for medical insurance premiums each month.

The regular monthly Social Security payment was \$ 1074.00. (We must round down to the whole dollar.)

# Information About Supplemental Security Income Payments

Beginning March 2002, the current Supplemental Security Income payment is \$ 0.00.

This is after we have withheld 241.00 to recover an overpayment.



XXX-XX-2934A XXX-XX-2934DI Page 2 of 2

This payment amount may change from month to month if income or living situation changes.

Supplemental Security Income Payments are paid the month they are due. (For example, Supplemental Security Income Payments for March are paid in March.)

Payments were stopped beginning August 2007.

#### **Date of Birth Information**

The date of birth shown on our records is April 20, 1963.

#### Medicare Information

You are entitled to hospital insurance under Medicare beginning September 1999.

You are entitled to medical insurance under Medicare beginning September 1999.

## Type of Social Security Benefit Information

You are entitled to monthly disability benefits.

## If You Have Any Questions

If you have any questions, you may call us at 1-800-772-1213, or call your local Social Security office at 866-964-7341. We can answer most questions over the phone. You can also write or visit any Social Security office. The office that serves your area is located at:

SOCIAL SECURITY SUITE 100 6161 AMERICAN BLVD W BLOOMINGTON, MN 55438

If you do call or visit an office, please have this letter with you. It will help us answer your questions.

Social Security Administration



# Case 4:13-cv-00360-BSW Document 2 Fire 100/14713 Page 6 of 10 This notice informs you of a change in the amount of your payments. Please read the back of the notice. If you have questions, call us or write to the address shown below.

GROSS MONTHL		MONTHLY HEALTH	MONTHLY		OTHER DEDUCTIONS OR ADDITIONS:			NET MONTHLY	
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NEW				43	-9.16	1			YOUR AFTER A
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\*SEE BACK FOR CODES FOR OTHER DEDUCTIONS OR ADDITIONS

UNITED STATES OFFICE OF PERSONNEL MANAGEMENT RETIREMENT OPERATIONS CENTER

PO BOX 45

**BOYERS PA 16017-0045** 

REFER TO
THIS NUMBER
WHENEVER YOU
CONTACT OPM

CLAIM NUMBER CSA 8 374444 0

YOUR PAYMENT DATED: 01/02/2013

Reason for adjustment.

You may use this notice as proof of your current rate of annuity.

YOUR NEW GROSS MONTHLY ANNUITY REFLECTS A 1.7% COST-OF-LIVING ADJUSTMENT. BY LAW, THE INCREASE IS ROUNDED DOWN TO THE NEXT WHOLE DOLLAR.

THE AMOUNT OF FEDERAL INCOME TAX WITHHELD FROM YOUR ANNUITY HAS CHANGED.

EFFECTIVE JANUARY 1, 2013, YOUR MONTHLY HEALTH BENEFITS PREMIUM FOR PLAN 111 WILL BE \$127.99. IF THE HEALTH BENEFITS PREMIUM SHOWN IN THIS MESSAGE IS THE ONLY CHANGE AFFECTING YOUR FEBRUARY 1 PAYMENT, YOU MAY NOT RECEIVE A SEPARATE NOTICE OF ANNUITY

To call our toll-free number, dial 1-888-767-6738 (TDD 1-855-887-4957).

004245104\*4501\*28536-01
GLORIA A BUNCH
APT 208
1455 UPPER 55TH ST E
INVER GROVE MN 55077-1530



March 27, 2013

Dear Judge 1

I am a clinical psychologist writing this letter at the request of Gloria Bunch whom I had worked with Gloria Bunch from 11-14-11 to 1-26-13 to treat her depression and posttraumatic stress disorder. The issue addressed in this letter pertains to her limited economic resources and competency to represent herself in court. In my opinion, the physical pain and anxiety she experiences, along with the complexity of the legal matters she is dealing with, would compromise her ability to represent herself in court. It is my hope that the court would assist Ms. Bunch is securing legal representation.

Thank you for your time and consideration.

Sincerely,

Mobert J. Havel Psy.D Licensed Psychologist



July 18, 2012

Mark Roos
Dakota County Adult Services

Dear Mr. Roos,

This letter is written on behalf of Gloria Bunch who I have been seeing since 11-14-11 for individual psychotherapy. She has been diagnosed with major depressive disorder as well as posttraumatic stress disorder. Her case has been complicated by psychological losses and trauma while she was living in Arkansas and Texas associated with her work and with physical impairment, and chronic pain resulting from failed orthopedic procedures. This has left her with significant loss of mobility and function, contributing to her depression. Gloria is facing eviction from her son whom she has been living with since she moved from Oklahoma. She has found an apartment at Salem Green in Inver Grove Heights with a heated indoor pool which would be an ideal location from which to meet her orthopedic needs and treat her chronic pain. I am also requesting PCA services to help maintain her independence and, if possible, financial assistance for rent and deposit.

Thank you for your time and consideration.

Sincerely,

Robert J. Havel Psy.D.

Licensed Psychologist

Minnesota

Mental Health Clinics

Robert Havel, Psy.D., L.P. Licensed Psychologist

3450 O'Leary Lane, Eagan, MN 55123 Appointments: (651) 454-0114 Voice Mail: (651) 365-8207



# **Twin Cities Pain Clinic**

Physician directed pain management & physical therapy

7235 Ohms Lane Edina, MN 55439 Tel: (952) 841-2345 Fax: (952) 841-2346 www.twincitiespainclinic.com

May 01, 2013

RE:

Gloria Bunch

DOB:

04/20/1963

## To Whom it May Concern:

Gloria Bunch is a patient at this clinic. Please allow patient to keep her file open and give patient more time to meet her deadlines due to her ADA status as patient has chronic pain and unable to walk. Contact clinic for further questions.

Sincer

<del>Jen</del>na Herman CNP





TCPC

7235 Ohms Lane Edina, MN 55439

Tel: (952) 841-2345 Fax: (952) 841-2346 www.twincitiespainclinic.com

January 14, 2013

RE:

Gloria Bunch

DOB:

04/20/1963

To Whom it May Concern:

Gloria Bunch is a patient at this clinic. Patient receives narcotic pain medication from this clinic for her chronic pain. Common side effects include drowsiness and decreased concentration which may affect patient's ability to concentrate or answer questions. Please contact clinic with questions.

Sincerely

Jenna Herman CNP